

OAHU CANDIDATES-  
SUBMIT 1 ORIGINAL AND 1 COPY  
  
NEIGHBOR ISLAND CANDIDATES-  
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT  
CANDIDATE COMMITTEE

COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Tommy Waters

(b) Committee Name:

Friends of Tommy Waters

(c) Mailing Address:

P.O. Box 411

(d) Phone (Bus)

586-8897

(Res)

394-1833

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third  
☐ 2nd Preliminary Primary ☐ Short Form <sup>1</sup> ☐ Second ☐ Fourth  
☐ Final Primary  
☐ Preliminary General  
☐ Final Election Period  
☒ Supplemental

REPORTING PERIOD

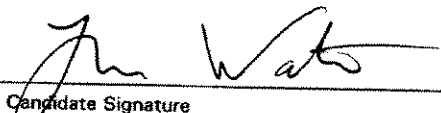
1/1/03 through 6/30/03

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Section IV on the Back of this Form Before Completing This Section)

|                                                                                           | COLUMN A<br>TOTAL THIS PERIOD | COLUMN B<br>ELECTION PERIOD <sup>2</sup><br>TOTAL TO DATE |
|-------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------|
| 1. Cash on Hand at the Beginning of the Election Period <sup>2</sup> .....                |                               | 2021.13                                                   |
| 2. Cash on Hand at the Beginning of this Reporting Period.....                            | 3273.41                       |                                                           |
| 3. Total Receipts (From Line 15).....                                                     | 7735.00                       | 9185.00                                                   |
| 4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....          | 11008.41                      | 11206.13                                                  |
| 5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....            | 2803.82                       | 3001.54                                                   |
| 6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4).... | 8204.59                       | 8204.59                                                   |
| 7. Total Loans at the Closing of this Reporting Period.....                               | 0.00                          |                                                           |
| 8. Total Unpaid Expenditures at the Closing of this Reporting Period.....                 | 62.09                         |                                                           |
| 9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....            | 62.09                         |                                                           |
| 10. Surplus/Deficit (Subtract Line 9 from Line 6).....                                    | 8142.50                       |                                                           |

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.



Candidate Signature

7-29-03

Date



Treasurer Signature

7/29/03

Date

<sup>1</sup> Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.

<sup>2</sup> An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

**SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(If Necessary, Complete Schedules A through E Before Completing This Section)

| RECEIPTS                                                                 | COLUMN A<br>TOTAL THIS PERIOD | COLUMN B<br>ELECTION PERIOD<br>TOTAL TO DATE |            |
|--------------------------------------------------------------------------|-------------------------------|----------------------------------------------|------------|
| 11. Contributions From:                                                  |                               |                                              | 11         |
| (a) Individuals/Other Entities/Noncandidate Committees/Political Parties |                               |                                              | 11(a)      |
| (i) Monetary and Non-Monetary Contributions of \$100 or Less.....        | 4585.00                       | 4735.00                                      | 11(a)(i)   |
| (ii) Monetary and Non-Monetary Contributions of More Than \$100.....     | 3150.00                       | 4450.00                                      | 11(a)(ii)  |
| (iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....                   | 7735.00                       | 9185.00                                      | 11(a)(iii) |
| (b) Candidate or Candidate's Immediate Family                            |                               |                                              | 11(b)      |
| (i) Monetary and Non-Monetary Contributions of \$100 or Less.....        | 0.00                          | 0.00                                         | 11(b)(i)   |
| (ii) Monetary and Non-Monetary Contributions of More Than \$100.....     | 0.00                          | 0.00                                         | 11(b)(ii)  |
| (iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....                   | 0.00                          | 0.00                                         | 11(b)(iii) |
| 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....       | 7735.00                       | 9185.00                                      | 12         |
| 13. Public Funds and Other Receipts.....                                 | 0.00                          | 0.00                                         | 13         |
| 14. Loans.....                                                           | 0.00                          | 0.00                                         | 14         |
| 15. Total Receipts (Add Lines 12 through 14).....                        | 7735.00                       | 9185.00                                      | 15         |
| DISBURSEMENTS                                                            |                               |                                              |            |
| 16. Expenditures.....                                                    | 2803.82                       | 3001.54                                      | 16         |
| 17. Loans Repaid or Forgiven.....                                        | 0.00                          | 0.00                                         | 17         |
| 18. Unpaid Expenditures Paid or Forgiven.....                            | 0.00                          | 0.00                                         | 18         |
| 19. Subtotal Disbursements (Add Lines 16 through 18).....                | 2803.82                       | 3001.54                                      | 19         |
| 20. Unpaid Expenditures.....                                             | 62.09                         |                                              | 20         |
| 21. Total Disbursements (Add Lines 19 and 20).....                       | 2865.91                       | 3001.54                                      | 21         |

CHECK ONLY ONE BOX  
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE  
☒ COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 2

Friends of Tommy Waters/ Tommy Waters

| DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION                                                                                                                             | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR                                                                | FOR AGGREGATES OF \$1,000 OR MORE<br>NAME OF EMPLOYER | AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD | AGGREGATE ELECTION PERIOD TOTAL TO DATE |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------|
|                                                                                                                                                                                     | IF A DEPENDENT MINOR, ENTER NAME OF PARENT                                                                                  | OCCUPATION                                            |                                                                                      |                                         |
| 4/11/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>R. Brian Tsujimura<br>190 Niuiki Cir.<br>Honolulu, HI 96821           |                                                       | 125.00                                                                               | 125.00                                  |
| 4/11/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Alexander & Baldwin, Inc.<br>P.O. Box 3440<br>Honolulu, HI 96801      | HIPAC                                                 | 150.00                                                                               | 150.00                                  |
| 4/11/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Ironworkers Union Local 625<br>94-497 Ukee St.<br>Waipahu, HI 96797   |                                                       | 1000.00                                                                              | 1000.00                                 |
| 4/14/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Jerry Lynch<br>4496 Aukai Ave<br>Honolulu, HI 96816                   |                                                       | 250.00                                                                               | 250.00                                  |
| 4/14/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Radcliffe & Assoc.<br>1649 Waikahalulu Ln. C-12<br>Honolulu, HI 96817 |                                                       | 250.00                                                                               | 250.00                                  |
| 4/14/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Melvia Kawashima<br>1015 Wilder Ave. #1005<br>Honolulu, HI 96822      |                                                       | 200.00                                                                               | 200.00                                  |
| 1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....                                                                                                 |                                                                                                                             |                                                       | 1975.00                                                                              |                                         |
| 2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii))..... |                                                                                                                             |                                                       |                                                                                      |                                         |

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

CHECK ONLY ONE BOX  
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☒ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE  
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION

SCHEDULE A  
MONETARY AND NON-MONETARY CONTRIBUTIONS  
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 2

Tommy Waters/ Friends of Tommy Waters

| DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION                                                                                                                             | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR                                                                           | FOR AGGREGATES OF \$1,000 OR MORE<br>NAME OF EMPLOYER | AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD | AGGREGATE ELECTION PERIOD TOTAL TO DATE |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------|
|                                                                                                                                                                                     | IF A DEPENDENT MINOR, ENTER NAME OF PARENT                                                                                             | OCCUPATION                                            |                                                                                      |                                         |
| 4/14/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Pacific Northwest Ltd<br>55 Merchant St. #1500<br>Honolulu, HI 96813             |                                                       | 500.00                                                                               | 500.00                                  |
| 5/12/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Hawaii Air Ambulance, Inc.<br>P.O. Box 30242<br>Honolulu, HI 96820               |                                                       | 125.00                                                                               | 125.00                                  |
| 5/12/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Balanced Viewpointss PAC<br>1130 N. Nimitz Hwy. #A215<br>Honolulu, HI 96817      |                                                       | 300.00                                                                               | 300.00                                  |
| 5/12/03                                                                                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>U. of Hawaii Professional<br>Assembly PCC<br>1017 Palm Dr.<br>Honolulu, HI 96814 |                                                       | 250.00                                                                               | 250.00                                  |
|                                                                                                                                                                                     | <input type="checkbox"/> NON-MONETARY CONTRIBUTION                                                                                     |                                                       |                                                                                      |                                         |
|                                                                                                                                                                                     | <input type="checkbox"/> NON-MONETARY CONTRIBUTION                                                                                     |                                                       |                                                                                      |                                         |
| 1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....                                                                                                 |                                                                                                                                        |                                                       | 1175.00                                                                              |                                         |
| 2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii))..... |                                                                                                                                        |                                                       | 3150.00                                                                              |                                         |

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

Tommy Waters/ Friends of Tommy Waters

PAGE

1

OF

2

| DATE OF EXPENDITURE                                                                                                 | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION                       | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 2/28/03                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Postmaster                                                           | Post office box                                                    | 70.00                                                                               |
| 3/21/03                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Oriental Trading Co.<br>4206 S. 198th St.<br>Omaha, NE 68137         | Plastic leis for fundraiser                                        | 55.81                                                                               |
| 3/13/03                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>DMM Enterprises<br>359 pakauwili Dr.<br>wahiawa, HI 96786            | Fundraiser mailing<br>poastcard mailing                            | 546.06                                                                              |
| 2/2 8/03                                                                                                            | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Professional Image<br>547 Halekauwila St. #106<br>Honolulu, HI 96813 | Color copies - cards                                               | 123.96                                                                              |
| 4/9/03                                                                                                              | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Bronson's<br>1088 Bishop St. LL-13<br>Honolulu, HI 96813             | Campaing fundrasieeer                                              | 1361.71                                                                             |
| 4/6/03                                                                                                              | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Costco- Hawaii                                                       | Beverages for fund-raiser                                          | 137.19                                                                              |
| 4/9/03                                                                                                              | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Longs /drugfss<br>1088 Bishop ST.<br>Honolulu, HI 96813              | Veverages for fund-raiser                                          | 86.05                                                                               |
| 1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....                                                            |                                                                                                                            |                                                                    | 2380.78                                                                             |
| 2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... |                                                                                                                            |                                                                    |                                                                                     |

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

Tommy Waters/ Friends of Tommy Waters

PAGE

2

OF

2

| DATE OF EXPENDITURE                                                                                                 | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION                             | PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION | AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD |
|---------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| 5/6/03                                                                                                              | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Spike! Advertising & Design<br>60 N. Beretania #3201<br>Honolulu, HI 96813 | Printing - letter-head                                             | 386.04                                                                              |
| 4/29/03                                                                                                             | <input type="checkbox"/> NON-MONETARY CONTRIBUTION<br>Postmaster                                                                 | Postage stamps                                                     | 37.00                                                                               |
|                                                                                                                     | <input type="checkbox"/> NON-MONETARY CONTRIBUTION                                                                               |                                                                    |                                                                                     |
|                                                                                                                     | <input type="checkbox"/> NON-MONETARY CONTRIBUTION                                                                               |                                                                    |                                                                                     |
|                                                                                                                     | <input type="checkbox"/> NON-MONETARY CONTRIBUTION                                                                               |                                                                    |                                                                                     |
|                                                                                                                     | <input type="checkbox"/> NON-MONETARY CONTRIBUTION                                                                               |                                                                    |                                                                                     |
|                                                                                                                     | <input type="checkbox"/> NON-MONETARY CONTRIBUTION                                                                               |                                                                    |                                                                                     |
|                                                                                                                     | <input type="checkbox"/> NON-MONETARY CONTRIBUTION                                                                               |                                                                    |                                                                                     |
| 1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....                                                            |                                                                                                                                  |                                                                    | 423.04                                                                              |
| 2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)..... |                                                                                                                                  |                                                                    | 2803.82                                                                             |

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE E  
UNPAID EXPENDITURES  
CANDIDATE COMMITTEE**

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

Tommy Waters/Friends of Tommy Waters

| DATE OF UNPAID EXPENDITURE                                                                                                                  | FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR          | AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD | NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD | AMOUNT PAID OR FORGIVEN THIS PERIOD       | AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD |
|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------|-------------------------------------------|--------------------------------------------------------|
|                                                                                                                                             | PURPOSE OF UNPAID EXPENDITURE                                          |                                                          |                                           |                                           |                                                        |
| 4/10/03                                                                                                                                     | Tommy Waters (reimbursement)<br>983 Aalapapa Drive<br>Kailua, HI 96834 | 0.00                                                     | 62.09                                     | <input type="checkbox"/> FORGIVEN<br>0.00 | 62.09                                                  |
|                                                                                                                                             | Food for volunteers/ Libby Manapua                                     |                                                          |                                           | <input type="checkbox"/> FORGIVEN         |                                                        |
|                                                                                                                                             |                                                                        |                                                          |                                           | <input type="checkbox"/> FORGIVEN         |                                                        |
|                                                                                                                                             |                                                                        |                                                          |                                           | <input type="checkbox"/> FORGIVEN         |                                                        |
|                                                                                                                                             |                                                                        |                                                          |                                           | <input type="checkbox"/> FORGIVEN         |                                                        |
|                                                                                                                                             |                                                                        |                                                          |                                           | <input type="checkbox"/> FORGIVEN         |                                                        |
| 1. SUBTOTAL (This Page).....                                                                                                                |                                                                        |                                                          | 62.09                                     | 0.00                                      | 62.09                                                  |
| 2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report).....              |                                                                        |                                                          | 62.09                                     |                                           |                                                        |
| 3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report)..... |                                                                        |                                                          |                                           | 0.00                                      |                                                        |
| 4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the Disclosure Report)..... |                                                                        |                                                          |                                           |                                           | 62.09                                                  |

Form CC-5(E) (Rev. 5/99)

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.